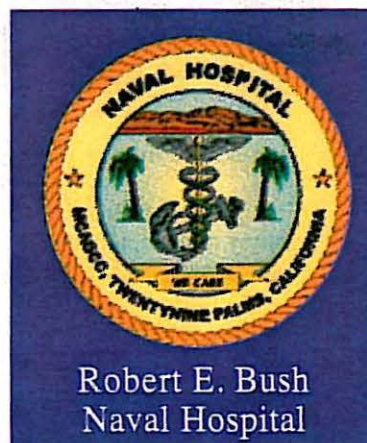
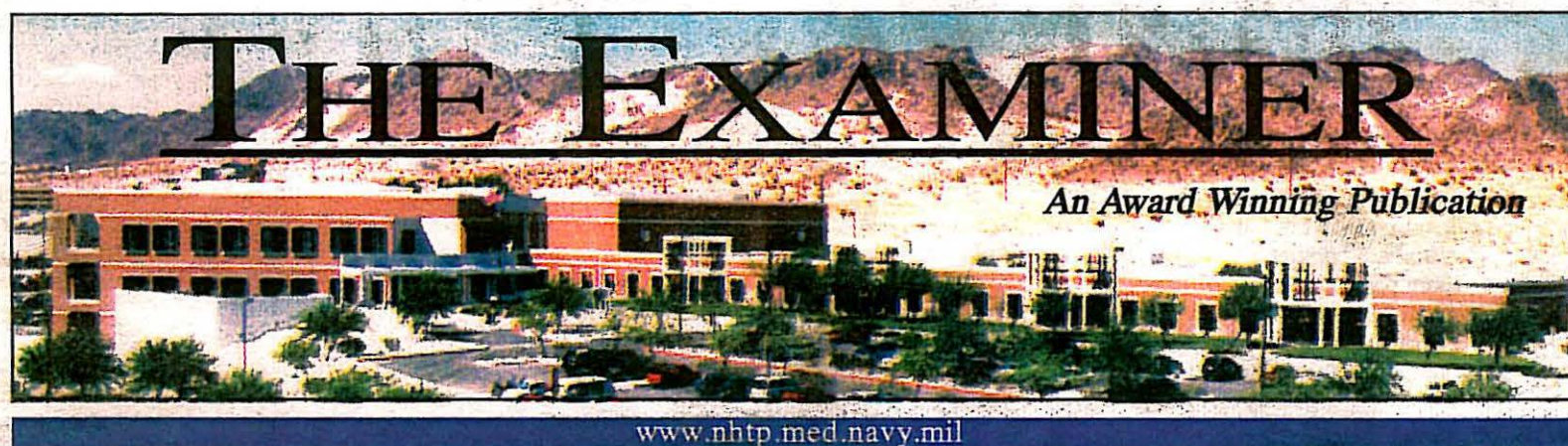
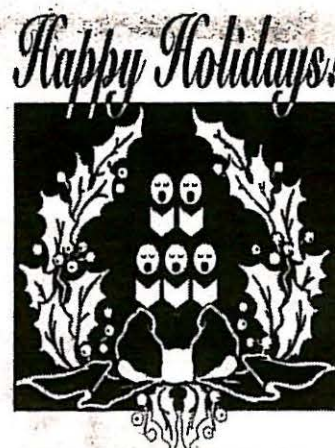


National Pearl Harbor Remembrance Day

December 7th

Robert E. Bush
Naval Hospital

Tricare Information Now Housed Under One Internet Roof

WASHINGTON (NNS) — Tricare beneficiaries will get a pleasant surprise the next time they visit Tricare Online. The Web site has a new name, a new look and a new home. It's now part of Tricare.mil, the official Web site for all Tricare information.

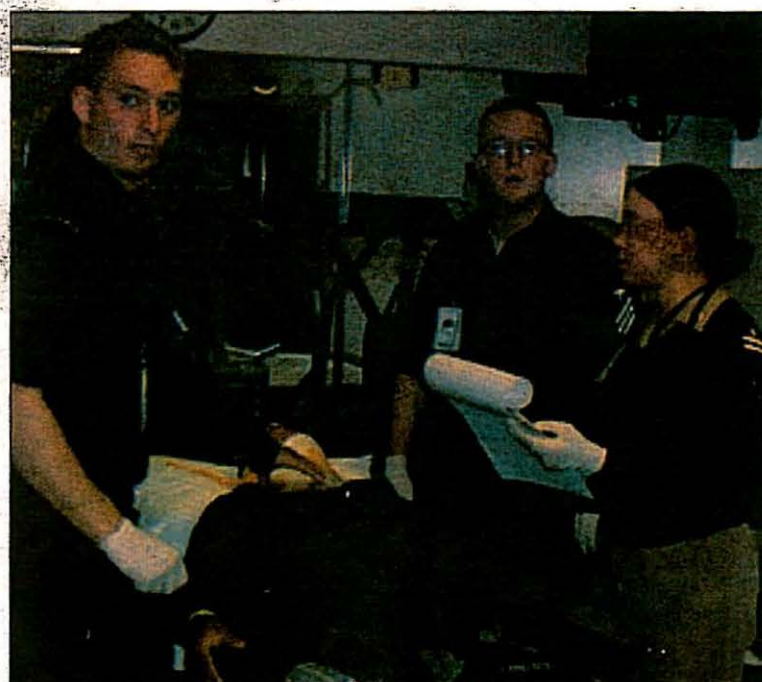
"We reorganized the Web site with our beneficiaries in mind," said Army Maj. Gen. Elder Granger, deputy director, Tricare Management Activity. "Now they can go to one site to look up benefit information, schedule an appointment or track claims. Everything's in one place, making the site easier to use."

Tricare.mil comprises five main content areas:

- My Health (Tricare Online) — personal health information and online appointment scheduling for Tricare Prime enrollees;
- My Benefit — Tricare benefit information;
- MHS Staff — resources for Military Health System staff members;
- Tricare Providers — information for Tricare network providers; and
- Pressroom — the latest news about Tricare and the military health system.

In the next phase of Web site improvements, beneficiaries will be able to enter their profile and receive benefit information tailored to

them. Tricare expects this feature to be available in winter of 2007. For more Department of Defense news, visit www.defenselink.mil. For more news from around the fleet, visit www.navy.mil.



The Robert E. Bush Naval Hospital participated in a State-Wide Disaster Drill on Nov. 16. The hospital is required to undergo several types of drills each year to meet health care standards set by the Joint Commission on the Accreditation of Healthcare Organizations and Navy Medicine. All drills are designed to ensure the staff of the hospital is ready to meet all patients needs regardless of the situation.

Emergency Room Procedures Explained

By Lt. Christopher Niles, Emergency Room Nurse
Robert E. Bush Naval Hospital

The Naval Hospital Twenty Nine Palms Emergency Room (ER) can be a confusing and sometimes frustrating place to receive healthcare. Our staff will do everything we can to help answer any questions that you may have during your visit to our service.

Continued on page 7

For more drill photos see page 5

Inside...

Whether travelling overseas for the holidays or just going to visit granny back home, it's a good idea to plan early so that your trip remains safe and sane.

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Doctors and pharmacists must change the way they provide medicines to outpatients to reduce adverse reactions to medications, concluded a three-phase research study conducted by a team of military, university and TriWest Healthcare Alliance physicians, pharmacists and nurses.

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Here's to your Health...

Travel Safety Tips for the Holiday Season

By Martha Hunt, MA Health Promotion Coordinator
Robert E. Bush Naval Hospital

Whether traveling overseas for the holidays or just going to visit granny back home, it's a good idea to plan early so that your trip remains safe and sane. Here are a few travel hints that can help.

Before you travel to another country, make sure you are up-to-date on any vaccinations you may need and carry a record of these vaccinations. Also, ensure that your dental care is up-to-date. You don't want to be searching for a dentist in a foreign port in an emergency.

Make sure you have copies of all of your health insurance records. Understand what is covered and what is not covered when travelling. This is especially important for pregnant women who are near their delivery date. It may be a nice thought to deliver your baby while home visiting granny, but will your insurance approve payment?

Long before you leave, put together a travel kit with all of your important health information and supplies in it such as:

- * Your primary care provider's name and phone number.

- * A list of your current medical conditions and medications with dosages.

- * Emergency contact phone numbers for family and friends. Use the acronym "ICE" — In Case of Emergency — enter the person who most needs to be contacted in case you are in an emergency situation and are unable to speak for yourself.

- * Sunscreen and sunglasses.

- * An extra pair of glasses or contact lenses if you wear them.

- * Insect repellent if you will be spending time outdoors.

- * A first aid booklet.

- * Extra paper products like toilet paper, facial tissues and feminine hygiene products (you may never use them, but they are a welcome sight if you need them — and if you are in a remote area, they may be hard to find!).

- * Basic over the counter (OTC) medicines for relief of pain, diarrhea, and cough.

Carry your travel kit in your carry-on luggage. This saves it from getting lost in the airport — especially important if it has your medications in it and you are due for your next dose.

Avoid buying drugs in foreign ports for several reasons. First of all, you may not be sure of the product you are buying, and

secondly, it may be illegal in the U.S.

If you will be visiting a warm sunny climate, remember what you learned here in Twentynine Palms during the summer. That is, wear plenty of sunscreen, and apply insect repellent 30 minutes after the sunscreen. Everyone is at risk for skin cancer, not just fair-skinned people. Also, avoid exercising in the mid-day sun and becoming dehydrated.

Swim only in water that you know is safe from parasites and predators. Also make sure, if swimming in the ocean, that you are aware of any rip tide currents and sewage contamination.

If you are travelling in cold climates, remember to wear clothing in layers for added

warmth and to keep your feet, hands and head covered since this is where you lose most of your body heat.

Wear a Medic Alert bracelet if you have a serious medical condition or allergy. If you do become ill overseas, contact the local U.S. Embassy, Consulate or U.S. military base for local health care options. If you can, avoid all medical and dental procedures while travelling overseas due to the risk of HIV or hepatitis infections from injections or transfusions.

If you have any of these symptoms while travelling overseas, seek medical care immediately:

- * High fever or a fever that does not break

- * Severe headache

- * Confusion or disorientation

- * An unusual rash and/or enlarged lymph nodes in the groin or armpit area

- * Very dark urine

- * Yellow eyes

When you return from your holiday, alert your primary care provider as to where you have been if you become sick within one month of overseas travel. Also, get a tuberculosis skin test (PPD) if you spent more than one month in Asia.

It's like your mom used to say: "An ounce of prevention is worth a pound of cure." By planning ahead for your holiday travels, you can return in the same good health that you departed in, rather than bringing back a pesky parasite or worse.

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Commanding Officer

Captain Mark O. Boman, MSC, USN

Executive Officer

Captain Dianne D. Aldrich, NC, USN

Public Affairs Officer/Editor

Dan Barber

Public Affairs Assistant

HM2 (SW) Erin L. Sjaarda

Command Ombudsman

Ryalin Huges — 1-800-431-0115

Stephenie Jenkins — 1-800-431-0237

Tiffany Niles — 1-800-431-3174

The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

How to reach us...

Commanding Officer Naval Hospital

Public Affairs Office

Box 788250 MAGTFTC

Twentynine Palms, CA 92278-8250

Com: (760) 830-2362

DSN: 230-2362

FAX: (760) 830-2385

E-mail: d.barber@nhnp.med.navy.mil

Hi-Desert Publishing Company

56445 Twentynine Palms Highway

Yucca Valley, CA 92284

Com: (760) 365-3315

FAX: (760) 365-8686



A Word About Colds, Flu From the Naval Hospital

By LT Virginia Skiba, MC, USN
Robert E. Bush Naval Hospital

Are you aware that colds, flu, most sore throats, and bronchitis are caused by viruses? Did you know that antibiotics do not help fight viruses? Plus, taking antibiotics when you have a virus may do more harm than good! And did you know that you can get free over-the-counter medications at the hospital pharmacy, without having to see your provider?

What are some viral infections?

A stuffy nose, sore throat, sneezing are usually signs of a cold. Tiredness, fever, headache, and body aches may mean you have the flu. Persistent cough that brings up mucus and makes it hard to

Continued on page 8

The Facts About Calcium and Bone Health

By Lt Michael J. Mero, MS, RD
Department Head, Nutrition Management
Robert E. Bush Naval Hospital

Did you pay attention to the Halloween Costumes this October?

Wherever you looked, there were vampires, ghosts, or bony skeletons grinning back at you. Vampires and ghosts don't really exist, but skeletons sure do! Every single person has a skeleton made up of many bones. These bones give your body structure, let you move in many ways, protect your internal organs, and more. It's time to look more closely at your bones and their health... the adult human body has 206 of them!

If you've ever seen a real skeleton or fossil in a museum, you might think all bones are dead. Quite the opposite! The bones that make up your skeleton are all very much alive, growing and changing all the time. A baby's body has about 300 bones at birth. These eventually fuse and grow to form the 206 bones that adults have.

During childhood and adolescence, a process occurs called modeling in which bones gain mass and undergo structural modifications. Bone formation continues at a faster pace until peak bone mass is attained at around 30 years of age. Throughout the remaining life span (about every 10 years), bone is continuously subjected to remodeling, a dynamic process of resorption and subsequent formation. Remodeling

maintains the mechanical integrity of bone tissue by replacing fatigued-damaged older bone with new bone.

Many things can interfere with the development of a strong and healthy skeleton. Genetic abnormalities can produce weak, thin bones, or bones that are too dense. Nutritional abnormalities can result in the formation of weak, poorly mineralized bone. Many hormonal disorders can also affect the skeleton. Lack of exercise, immobilization, and smoking can also have negative effects on bone mass and strength.

Achieving recommended levels of intake for calcium, vitamin D, and other nutrients during infancy, childhood, and adolescence is critical to maintaining healthy bones throughout life. Approximately 99 percent of total body calcium is found in the skeleton; therefore, the primary need for dietary calcium is for bone mineral deposition. The active process of calcium absorption in the intestines requires vitamin D, which emphasizes the fact that good bone health requires satisfactory intakes of both calcium and vitamin D.

Below are the dietary requirements for calcium (Ca) throughout the lifespan:

- Infants 0-6 months = 210 mg (Ca)/day
- Infants 6-12 months = 270 mg (Ca)/day
- Children 1-3 years = 500 mg

- (Ca)/day
- Children 4-8 years = 800 mg
- (Ca)/day
- Children 9-18 years = 1300 mg (Ca)/day
- Adults 18-50 years = 1000 mg (Ca)/day
- Adults 51-70 + years = 1200 mg (Ca)/day

The proportion of children who actually achieve the recommended calcium intake declines after the age of 2, reaching its lowest point between the ages of 12 and 19 years. That time during a child's life is when the calcium requirement is highest because the accumulation of bone mineral is at its peak. The suboptimal intakes of calcium may be related to the replacement of milk intake by soft drinks and fruit drinks.

A registered dietitian (RD) should be consulted for a more thorough assessment of diet and to make the necessary recommendations to improve calcium intake. The RD will also instruct you on reading and interpreting food labels; most importantly, how to translate the calcium percentage on the nutrition fact panel.

Below is a list of some common foods that are good sources of calcium:

- Dairy foods:
- * Nonfat milk -- 1 cup = 223 mg
- * Yogurt -- 6 oz = 258 mg
- * Cheese -- 1 oz = 202 mg

- Nondairy foods:
- * Salmon -- 3 oz = 203 mg
- * Tofu -- 1/2 cup = 204 mg
- * White beans -- 1 cup = 161 mg
- * Broccoli, cooked -- 1 cup = 62 mg
- * Collards, cooked -- 1 cup = 266 mg
- * Baked beans, canned -- 1 cup = 127 mg
- * Tomatoes, canned -- 1 cup = 87 mg
- Foods fortified with calcium:
- * Calcium-fortified orange juice -- 1 cup = 300 mg
- * Fortified breakfast cereals -- 3/4 - 1 cup = 100 mg
- * Instant oatmeal -- 1/2 cup = 65 mg
- * Calcium-fortified soy milk -- 1 cup = 200-500 mg

Another important factor in achieving optimal bone health is physical activity. Programs that have demonstrated skeletal benefits have included impact activities or resistance-training exercises, including walking, jumping, jogging, running, soccer, racquet sports, weight lifting, dancing, hiking, and stair climbing. To promote bone and overall health, children should accomplish 60 minutes per day and adults should achieve 30 minutes per day of moderate intensity physical activity on most, preferably all, days of the week.

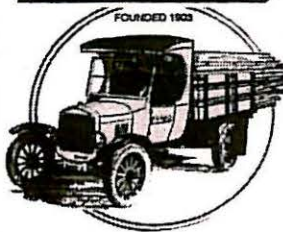
In recognition of the importance of promoting bone health, on 21 March 2002, President

George W. Bush proclaimed the years 2002 to 2011 as the Decade of the Bone and Joint. During these years, health professionals have a responsibility to assess calcium and vitamin D intake, physical activity, and adverse behaviors such as smoking and excess alcohol intake. It is important to promote the consumption of a healthful balance of nutritious foods and to adopt a quality exercise regimen.

Your bones help you out every day, so make sure you take care of them. Here are some everyday tips:

- Protect those skull bones by wearing a helmet
 - When you use a skateboard, skates, or a scooter, wear wrist supports and elbow and knee pads
 - Always wear the right equipment when participating in a contact sport
 - Take caution when playing on a trampoline as you could end up with broken bones from jumping on them
 - Strengthen your skeleton through adequate dietary calcium intakes
 - Be active!
- Be kind to your bones, and they will treat you right! If you have any questions or concerns, contact your PCM to obtain a referral to see the Registered Dietitian.

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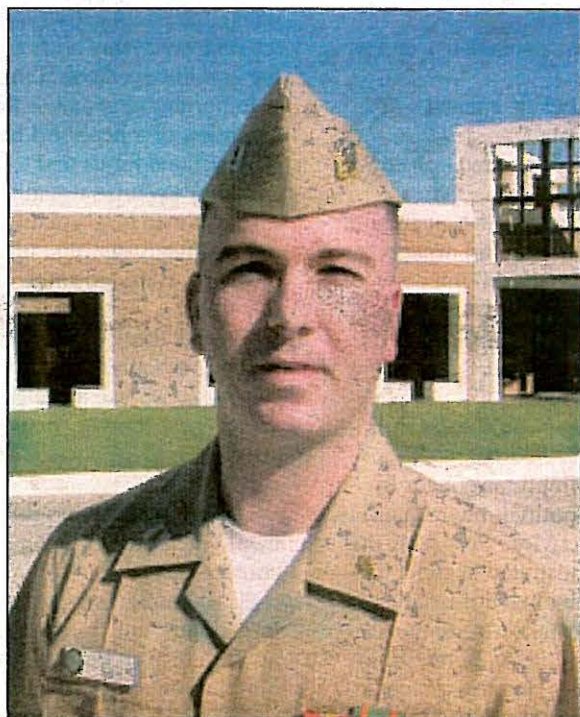


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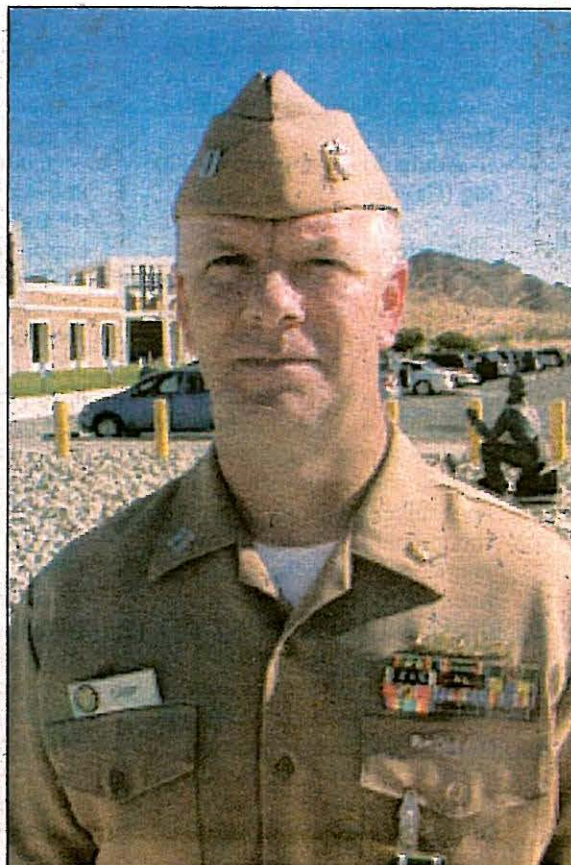
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Super Stars



Lt. Michael Mero, Head, Nutrition Management Department receives a Certificate of Appreciation for his management of the 2006 Active Duty Fund Drive for the Navy and Marine Corps Relief Society.



Lt. Raymond Camp, of Surgical Services, receives a Navy and Marine Corps Commendation Medal for his work as Division Officer and the Command Infection Control Officer.



Lt. Michelle Clinton, Emergency Medicine Department takes the oath at her recent Promotion Ceremony to Lieutenant.



Petty Officer Second Class Franz Reyes of the hospital's Laboratory Department, receives a Navy and Marine Corps Achievement Medal for his professional achievement as a Laboratory Technician at his last command, Naval Hospital Bremerton, Washington.



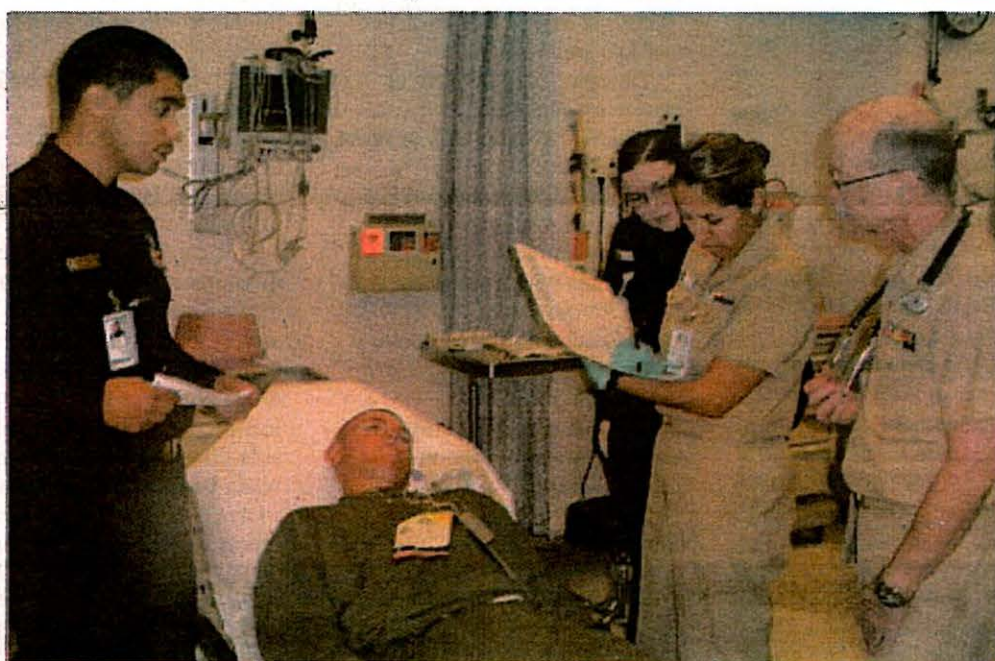
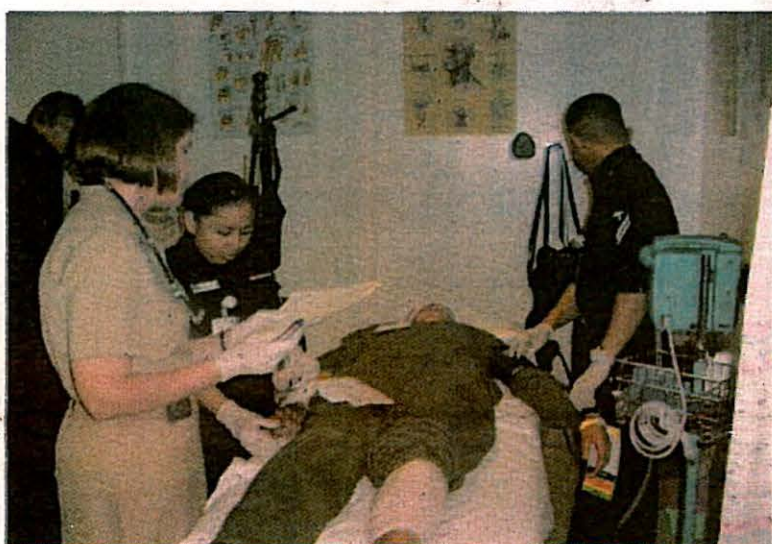
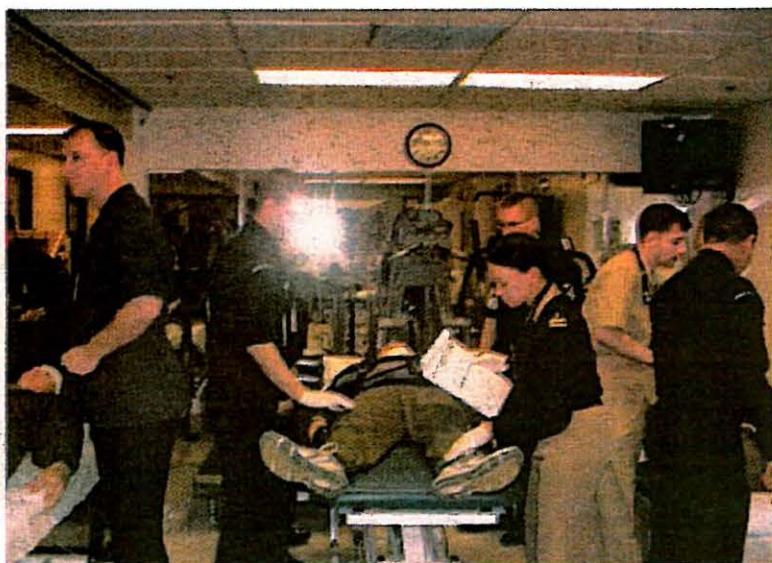
Fawn Morocco, Outpatient Services and OB/GYN Clinic, receives a Letter of Appreciation for her outstanding service to her department earning 23 positive comments from customers.



Petty Officer David Toston, Preventive Medicine Department, receives a Commanding General's Certificate of Commendation for his work on the General's Inspection Program.

Disaster Drill Photos...

By HM2 (SW) Erin Sjaarda



Study Shows How to Reduce Adverse Drug Events

By Richard Gray
TriWest Healthcare Alliance

Doctors and pharmacists must change the way they provide medicines to outpatients to reduce adverse reactions to medications, concluded a three-phase research study conducted by a team of military, university and TriWest Healthcare Alliance physicians, pharmacists and nurses.

The team initiated the study prompted by data that confirmed the Institute of Medicine's announcement in 1997 that error rates were much too high for the well-being of the public. The literature suggested that pharmacy-related errors could be successfully addressed on an outpatient basis.

Taking prescription medicines may cause nearly 2 million adverse drug events (ADEs) annually and up to 10 percent are life-threatening or fatal, but a significant number can be prevented, said TriWest Medical Director Brian Casull, M.D., who led the Patient Safety-Adverse Drug Event Project, which began in 2001.

"Up to one patient out of every three who are on medication may be at risk for an ADE at any given time," Dr. Casull said.

The study concludes that ADEs can be reduced among outpatients with better education, and improved communication and record-keeping between physicians, pharmacists and patients.

"The model predicted cost savings can be achieved by reducing ADEs, which results in less money spent treating ADEs," Dr. Casull said. "For every dollar spent on prescription medicines, \$1.30 is spent to address the impact of ADEs through emergency room and hospital care."

The study recommends that doctors improve their knowledge of drugs and clarify illegible and incomplete prescriptions before administering a drug, and that patient prescription information should be more readily available to doctors.

Those at higher risk to suffer an ADE are:

- * Patients who take five or more medications;
 - * Patients who take 12 or more doses per day;
 - * Patients whose medication regimen has changed four or more times in a year;
 - * Patients who have more than three chronic diseases;
 - * Patients who have a history of not complying with prescription instructions;
 - * Patients who take drugs that require therapeutic monitoring.
- ADE factors
- * Age and sex (older and female);

* The number of pharmacies used in filling prescriptions;

* The number of health care providers prescribing medications;

* Beers List Drugs (medications that have high risk of causing adverse drug events in women and the elderly).

Dr. Casull said the study recommends safe practices" for using medications, including:

- * Keep a current list of prescriptions including dosage, frequency, and pharmacy name;
- * Ask doctors to clearly write the medications purpose on any prescription;

* Keep medicines in their original containers complete with directions;

* Don't chew or break pills unless instructed;

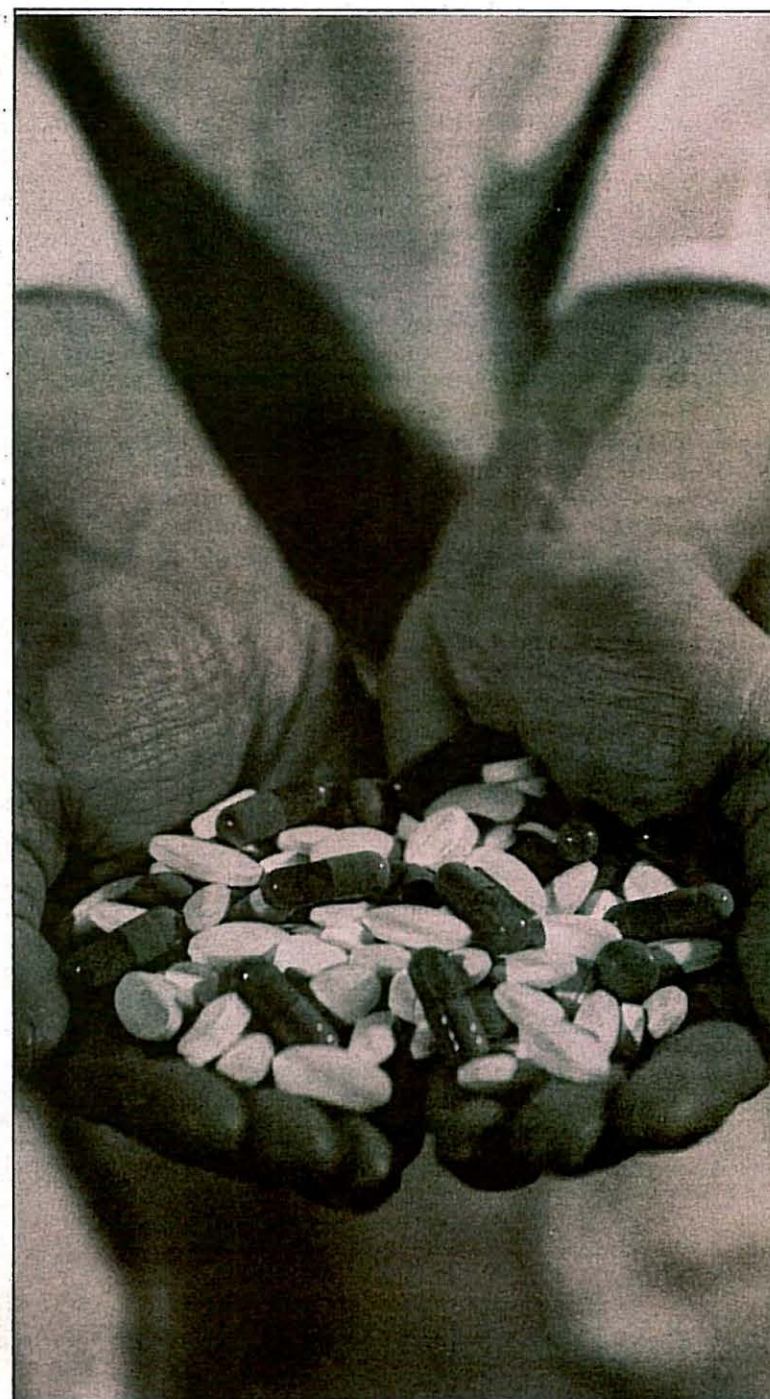
* Don't store medications in the bathroom or in direct sunlight;

* Never take someone else's medication;

* Take a list of over-the-counter products in use and a list of allergies to medicines or food on visits to the doctor.

Dr. Casull recommends asking these questions while at the doctor's office — Is a generic version is available? Will the medicine work safely with other drugs and over-the-counter medications? Are there any potential side effects or tests required when taking the medication?

Dr. Casull advises patients to report any unusual reactions or



side effects if switching from brand name to generic drugs.

"An ADE can manifest itself in many ways, from a simple rash that clears by itself or an acute life-threatening allergic reaction that can impact breathing and heart rate," Casull said. "The most common symptoms that require hospitalization are allergic, such as itchy eyes or skin and difficulty breathing, and neurological signs such as passing out or unusual mental status changes. They also can present themselves as a worsening of medical symptoms that a patient already has."

Among these participating in

the study were the Offutt and Peterson Air Force bases, the United States Air Force Academy, and Fort Carson, an Army post serving as the control group. Others involved with the project were the University of Arizona School of Pharmacy, Express Scripts, and TriWest Healthcare Alliance's Healthcare Services and Quality Improvement departments.

The military's health care program, TRICARE, embraced the study and is interested in conducting a study on a larger scale aimed at reducing ADEs among TRICARE's beneficiaries younger than 65.

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ER Procedures...

Continued from page 1

We must prioritize patients so that the critical and life threatening illnesses are treated first. This may mean that less serious illnesses may not be seen in the order that they come in to the ER. We try very hard to keep the waiting time to a minimum, but wait time may vary with the number of patients and the severity of the illnesses that are currently being treated.

If you find that you need to bring yourself or a family member to our emergency service, here are some things that you can do that may improve your visit. Bring a list of medications and correct doses. If you don't know these, then bring the medications in with you. Be sure to let the triage nurse know of any allergies or significant medical problems that you may have. Have someone available to drive you home. Sometimes we give medications that don't allow you to drive.

Every patient is important to us! Every patient will receive attention as quickly as we can provide it. Our busiest times are evening hours, on weekends and holidays. To help you through your visit to the ER, here is an example of a typical visit: Check in at the ER Registration Desk. First and foremost we provide patient privacy at all times. If standing in line to check in, please allow the person in front of you privacy. The medical clerk will create a chart to document your visit. You will be asked why you are here and current address, phone and insurance information.

The triage nurse is the first health professional you will see. He or she will need descriptions of your illness, medications and allergies. Patients waiting for treatment will be prioritized by need severity of symptoms and condition on presentation. The triage nurse can provide first aid supplies, such as Tylenol, Motrin, bandages, splints or ice packs if needed. Your blood pressure and temperature will be recorded at this time. You may be

asked to provide a urine sample, visit radiology for x-ray imaging, or have a blood sample drawn during this phase of your visit. Following this initial evaluation of your injury or illness, you will be directed to the appropriate waiting area.

The hospital's ER will try to minimize the time spent in the waiting area. Your comfort, while waiting, is important to us. We ask that you refrain from eating or drinking while awaiting treatment. Those accompanying you are welcome to use the hospital's snack area, located on the first floor, Oceanside. If you wish to inquire about the status of a patient, please use the beige wall phone in the waiting area. This telephone rings at the nursing station. The staff will be happy to provide you updated information.

As soon as possible, you will be called and taken to a room in the ER for an appropriate evaluation and treatment of your problem.

A healthcare provider will perform a physical examination. If injury or illness requires a specialist, one will be consulted to aid in your evaluation. The ER at times can be very busy and crowded. We ask that only one support person accompany patients to help protect privacy.

If your problem does not require hospital admission, you will be discharged from the ER. Written instructions detailing home care procedures will be explained by a health care professional and given to you. Please do not hesitate to ask questions regarding your concerns. At, or before discharge you may receive a follow-up referral or prescription for medication. Appropriate actions to facilitate either will be explained by a health care professional. The hospital's pharmacy is located on the first floor, across from the Radiology department.

Feel free to offer comments to the Emergency Medicine Department's Customer Service Representative if you have any concerns or would just like to offer your appreciation for the service you were provided.

TRICARE Help Available for Chronic Asthma, Heart Patients

By Cici Cea
TriWest Healthcare Alliance

Living with chronic illness can be frustrating and challenging, but individuals who effectively manage their disease and adopt a healthy lifestyle can lower their risk of developing complications.

This is where TriWest Healthcare Alliance's disease management program can help.

The program focuses on educating participants on how to improve their health management skills while living with chronic asthma and congestive heart failure. This program is free to eligible TRICARE beneficiaries and their family members.

Once a patient is enrolled in the Disease Management program:

- * A Disease Management Clinician (DMC) will schedule an appointment to call and review the patient's health status.

- * Based on the patient's status and personal health goals, the DMC will develop a customized educational plan and will work with the patient to reach established goals.

- * The DMC will send a letter to the patient's physician so they are aware that he/she is participating in the program.

- * The DMC will continue to help the patient as long as he/she wants to participate and work toward achieving his/her wellness goals.

"TriWest believes that knowledge is a powerful tool," said Kathleen Sobera, Director of Population Health Improvement at TriWest Healthcare Alliance. "Our specially trained clinicians are available to provide patients with information they need to stay healthy and avoid the complications associated with asthma and congestive heart failure."

TRICARE beneficiaries interested in enrolling in the Disease Management program should call TriWest toll-free at 1-888-259-9378 to see if they are eligible to participate. More information is posted online at www.triwest.com under the Healthy Living section.

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Colds and Flu...

Continued from page 2

breathe may be bronchitis.

Body aches, sore throat, nausea, vomiting and diarrhea usually mean you have gastroenteritis (stomach flu).

What are some bacterial infections?

Sore throat, headache, fever, without runny nose may be Strep Throat. Swelling or pain around the eyes, headache, and a dry cough or discharge from the nose may mean you are developing sinusitis. Fever and persistent cough that brings up mucus may be signs of pneumonia.

When do you or your child need antibiotics?

If your doctor determines you have a bacterial infection, he or she may prescribe antibiotics. If you are given antibiotics make sure you take them as prescribed and finish the full course.

Why don't antibiotics work for colds and runny noses?

Antibiotics kill bacteria, not viruses. Most coughs, colds, and sore throats are caused by viruses. Taking antibiotics for viral infections will NOT cure the infection, will NOT keep other people from catching the illness, and will NOT help you feel better.

What are the dangers of using antibiotics?

Using antibiotics when they are not needed causes some bacteria to become resistant to the antibiotic. The resistant bacteria are stronger and harder to kill. They can stay in your body and can cause severe illnesses that cannot be cured with antibiotic medications. A cure for resistant bacteria may require stronger treatment, possibly a stay in the hospital and antibiotics given by a needle. In addition, antibiotics can cause unexpected side effects like diarrhea, stomach pain, and yeast infections in women.

When should you or your child see the doctor?

You usually do not have to see your doctor right away if you or your child have signs of a viral infection. But you should call your doctor in these situations:

- Your symptoms get worse after 5-7 days
- Your symptoms last longer than 14 days
- After feeling a little better, you show signs of a more serious problem. Some of these signs are nausea, high fever, chills, chest pain, or coughing thick, dark green or brown mucus.
- You should bring any child

under 2 years old who looks very ill or dehydrated

How do you avoid getting the cold?

- Wash your hands often!
- Avoid people with colds whenever possible.
- Sneeze or cough into a tissue, then wash your hands.
- Don't touch your nose, eyes, or mouth. Germs can enter your body more easily by these parts.

How do you avoid getting the Flu?

A flu shot can lower your chances of getting the flu. The best time to get the flu shot is from middle of October to November.

Who should get the flu shot?

Almost all people who want to lower their chances of coming down with the flu can get a flu shot.

Flu shots are most important for:

- Children, aged 6-59 months
- Pregnant women
- People 50 years of age and older
- People of any age with certain medical conditions such as asthma, diabetes, COPD
- People who live in nursing homes and other long term care

facilities

- Household contacts of persons at high risk for complications from the flu
- Household contacts of children less than 6 months old

How do you and your child get the flu shot?

The flu vaccine supply should be delivered by early November, please keep checking in with the hospital.

Did you know you and your child can receive free cold and flu medications from the pharmacy, without having to see your doctor?

The pharmacy at the hospital is open Monday through Friday, 8 a.m. to 4:30 p.m.

You can get the following medications for you and your child over 2 years old, up to 3 per month:

If you want to:

Choose this medicine:

Unclog a stuffy nose

Sudafed

Quiet a cough

Robitussin or Robitussin DM

Stop runny nose and sneezing

Benadryl, Dimetapp, Actifed

(antihistamines)

Ease a sore throat

Cepacol

Ease fever, headache, body aches

Tylenol or Ibuprofen

Moisturize a dry nose

Saline Nasal Spray

What about your children?

Most runny noses and coughs in kids are due to colds and they do not need antibiotics.

However bring your child if he or she has the following signs:

- Worsening symptoms
- Fever under 101 and ear pain
- Children under 2 years old
- If you have any questions or concerns

Do not give aspirin or other salicylates to children or teenagers with symptoms of a cold or flu. They can get sick or die from a rare condition if they take these medicines while they have these symptoms. However acetaminophen (Tylenol) and ibuprofen (Motrin, Advil) are OK.

Do you have further questions?

Stop by the hospital or call your provider!

Tender Loving Christmas is underway!
TLC invites you to be a part of this wonderful, warm Christmas program.

TLC has a number of programs during the holidays to help those who would otherwise spend Christmas alone and with out joy.



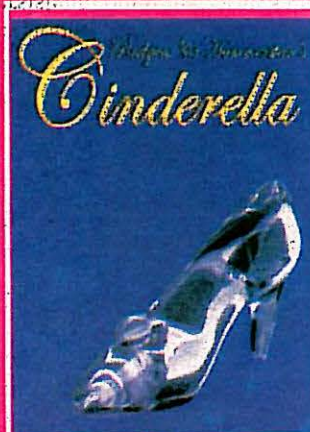
CALLING ALL SANTAS!

We are making a list of needed items for this season - we even have elves to come pick up and deliver! All in One Towing in Yucca Valley and Thomas Towing in 29 Palms are available to pick up and deliver. Just give them a call!

Call 366-9012
if you would like to help -

A few things we need...

Canned Goods - Clothes - Toys & more Toys - Sundries for Vets



"Roger's Hammerstein's"
Magical Tale

Nov 17
thru
Dec 16
Thursday,
Nov. 30th
showing 7pm



Directed by Kathryn Ferguson

Tickets prices are \$9 General Admission, \$7 Seniors, Military w/ID and DAN Members, \$6 Students. \$1 Student rush is back for the 2006 season



Theatre 29

Twenty-nine Palms, Sullivan & Adobe
Box Office Phone : 361-4151